

EXHIBIT J

NAME: [REDACTED] SSN: [REDACTED] 132nd MP Co.

PAY (Rente de Survivants)
1,749.30

(See Continuation Sheet)

DATE 13 APR 80 TIME 1000Z FROM JDOG TO JDOG

attached.

34 10 05

Reduction to Private First Class (E3); and extra duty for 45 days.

6. You are advised of your right to appeal to the **MO Major, JTF CDR** within 5 calendar days. An appeal made after that time may be rejected as untimely. Penalties are effective immediately unless otherwise stated above.

26 Feb 62 [REDACTED] JDOG

c. [] (apparent and submit additional)

7 May 03

1. Supra-Typing

☐ Denied ☐ Granted as follows: #1

1997

Introduction

1. 背景

1. IDENTIFICATION OF SUBJECTS

Informal AR 15-6 Investigation

U S D

CM

Continuation Sheet No. 1 DA Form 2627 RECORD OF PROCEEDINGS UNDER
ARTICLE 15, UCMJ [REDACTED] 132nd MP Co., JTF
GTMO, United States Army

ITEM 1 Cont'd:

Specification #1: In that you, did, at U.S. Naval Station, Guantanamo Bay, Cuba, on or about 10 April 2003, behave yourself with disrespect toward [REDACTED] your superior commissioned officer, then known by you to be your superior commissioned officer, by saying to him, "And what? And what?" or words to that effect, in response to his order to leave Sierra Block. This is in violation of Article 89, UCMJ.

Specification #2: In that you, who knew or should have known of your duties at U.S. Naval Station, Guantanamo Bay, Cuba, on or about 10 April 2003, were derelict in the performance of those duties in that you negligently failed to secure a detainee cell, as it was your duty to do. This is in violation of Article 92, UCMJ.

Specification #3: In that you, did, at U.S. Naval Station, Guantanamo Bay, Cuba, on or about 10 April 2003, unlawfully strike a detainee on his body with your fist after the detainee was shackled. This is in violation of Article 128, UCMJ.

NOTES

- 1 Insert a concise statement of each offense in terms stating a specific violation and the Article of the UCMJ (Part IV, MCM). If additional space is needed, use Item 11 or continuation sheet as described in item 11 below.
 - 2 Inform the member of the maximum punishment which may be imposed under Article 15.
 - 3 Inform the member that if he or she demands trial, trial could be by SCM, SPCM, or GCM. Additionally, inform the member that he or she may object to trial by SCM and that at SPCM or GCM he or she would be entitled to be represented by qualified military counsel, or by civilian counsel at an expense to the government. If the member is attached to or embarked in a vessel, he or she is not permitted to refuse Article 15 punishment. In such cases, all references to a demand for trial will be lined out and an appropriate remark will be made in item 11 indicating the official name of the vessel and that the member was attached to or embarked in the vessel at the time punishment was imposed.
 - 4 Give the member copy 5 of this form.
 - 5 Offenses determined not to have been committed will be lined out. If the imposing commander decides not to impose any punishment, the member will be notified and all copies of this form destroyed.
 - 6 Amounts of forfeiture of pay will be rounded off to the next lower whole dollar. If a punishment is suspended, the following statement should be added after it: To be automatically remitted if not vacated before (date). If punishment includes a crime demeriton or reprimand, it will be attached to this form and filed in item 11.
 - 7 The imposing commander will initial the appropriate block. The OMEP performance fiche is routinely used by MOS/specialty career managers and DA selection boards. The OMEP punishment fiche is not given to MOS/specialty career managers or DA selection boards without approval of the Cdr, MILPERCEN or selection board proponent.
 - 8 If the member appeals, this form and all written evidence considered by the imposing commander will be forwarded to the superior authority.
 - 9 Before acting on an appeal, it must be referred to a judge advocate for advice when the punishment, whether or not suspended, includes reduction of one or more pay grades from the fourth or a higher pay grade, or is in excess of one of the following: 7 days arrest in quarters, 7 days correctional custody, 7 days forfeiture of pay, or 14 days of either wear stains or restriction. (See Article 15e (1) to (7), UCMJ.)
 - 10 The superior authority will initial the appropriate block. If the appeal is granted, the specific relief granted will be stated according to item 12.
 - 11 In this space indicate the number of pages attached as follows: Allied documents on appeal consist of _____ pages. Allied documents include all written matters considered by the imposing commander submitted by the member on appeal and the commander's rebuttal, if applicable. If additional space is needed for completion of any item (c), use plain bond headed "Continuation Sheet 1", etc.
 - 12 Applicable portions of the following format may be used to record action taken on appeal. Appropriate language should be entered in item 11 or, if necessary, on a continuation sheet. Supplementary actions (para J-32, AR 27-10) will be recorded on DA Form 2627-2.
- Suspension, Mitigation, Remission, or Setting Aside
- (DATE)
- On (date), The punishment(s) of _____ imposed on (show of punishment) (was) (were) (suspended and will be automatically remitted if not vacated before (date)) (mitigated and) (set aside, and all rights, privileges, and property affected restored) (by my order) (by order of) (the officer who imposed the punishment) (the successor in command to the imposing commander) (its superior authority).
- (Typed name, grade, and organization of commander) _____
- 13 Racial/ethnic identifiers will be placed in item 11 (Chapter 15, AR 27-10).

JTF GTMO ARTICLE 15 REQUEST FORM

1. I request that a Summarized Article 15/ Company Grade Article 15/ X Field Grade Article 15/ Supplemental Action be imposed on the following soldier.

NAME (Last, First MI): [REDACTED]

RANK: [REDACTED]

SSN: [REDACTED]

UNIT: 3rd

PEBO: [REDACTED]

SEX: [REDACTED]

RACE: [REDACTED]

OFFENSE(S):

Sec. 812

2. Please include all bars to reenlistment, counseling statements, full MP reports, sworn statements, breathalyzers, urinalysis and chain of custody, and corrective training measures taken that relates to the incident. Incomplete packets will NOT be accepted.

3. Article 15s will be processed within 48 hours upon receipt of completed packet. Any delays will be forwarded to the POC for the action.

IMPOSING COMMANDER'S

SIGNATURE BLOCK

[REDACTED]

PHONE:

EMAIL:

Do Not write the punishment in on the Article 15, write them on the request form at the bottom.

MAXIMUM PUNISHMENT AUTHORIZED

SUMMARIZED14 DAYS EXTRA DUTY
14 DAYS RESTRICTIONCOMPANY GRADEREDUCTION TO E-4
FORFEITURE OF 7 DAYS PAY
\$ AS AN E-4
\$ AS AN E-3
14 DAYS EXTRA DUTY
14 DAYS RESTRICTIONFIELD GRADEREDUCTION TO E-1
FORFEITURE OF 1/2 MONTH
PAY FOR TWO MONTHS
\$7,100 AS AN E-4
\$7,100 AS AN E-3
\$6,450 AS AN E-2
\$5,750 AS AN E-1
45 DAYS EXTRA DUTY
45 DAYS RESTRICTION

Company Grade authorities can administer NJP to personnel in the grade of E-5 and below.

PUNISHMENT IMPOSED

REDUCTION TO THE GRADE OF E- (SUSPENDED FOR DAYS)
FORFEITURE OF \$ FOR DAYS/MONTHS (SUSPENDED FOR DAYS)
EXTRA DUTY FOR DAYS (SUSPENDED FOR DAYS)
RESTRICTION FOR DAYS (SUSPENDED FOR DAYS)

SUSPENSIONS MAY NOT EXCEED 180 DAYS.

Location: Camp America Saebur AB107

Hours: Monday thru Friday 0800-1700 Phone: x3455 for SPC Peryn or x3581 for CPT Heller

Reduction E-3
45 Days Ex-Dut

SIA ARTICLE 15 PROCESSING SHEET - ARMY

Rank/Name

SSN:

Unit/Section:

R 2nd MP Co.

DATE COMPLETED

- ☐ DATE RECEIVED NJP REQUEST:
- ☐ REQUEST FORM FILLED OUT COMPLETELY:
- ☐ ALL ALLIED DOCUMENTATION SUPPORT REQUESTED ACTION:
- ☐ ENTER ARTICLE 15 INTO NJP LOG:
- ☐ ALL CHARGES ARE DRAFTED CORRECTLY:
- ☐ CHARGES HAVE BEEN REVIEWED BY JUDGE ADVOCATE:
- ☐ MAKE TWO COPIES OF ENTIRE PACKET (ORIGINAL TO UNIT, 1 - COPY TO SOLDIER, 1 COPY TO SIA)
- ☐ CONTACT UNIT TO PICK-UP OF ARTICLE 15 PACKET: DELIVERED 28 APR 03
- ☐ DATE AND TIME UNIT PICKED UP ARTICLE 15:
- ☐ CALL UNIT WITHIN 72 HOURS TO CHECK STATUS OF ARTICLE 15:
- ☐ DATE AND TIME OFFERED:
- ☐ ACKNOWLEDGEMENT OF RECEIPT OF CHARGES AND ELECTIONS (to accept Article 15 or demand court-martial):
- ☐ DATE MEMBER IS SERVED PUNISHMENT (Block 6):
- ☐ DATE RETURNED TO SIA OFFICE:
- ☐ REVIEW ALL SIGNATURES AND DATES (Blocks 2, 3, 6 & 7)
- ☐ IS PUNISHMENT LEGAL:
- ☐ TRANSFER PUNISHMENT(S) FROM REQUEST SHEET ONTO 3627:
- ☐ DATE PUNISHMENT IMPOSED:
- ☐ UPDATE NJP LOG:
- ☐ DID SOLDIER APPEAL AND IF SO WITHIN 5 DAYS: (YES/NO)
- ☐ IF YES, DATE APPEAL SUBMITTED:
- ☐ DATE FORWARDED TO APPELLATE AUTHORITY (if applicable):
- ☐ DATE ACTED ON BY APPELLATE AUTHORITY (if applicable):
- ☐ DATE SOLDIER SIGNED ACTION ON THE APPEAL (if applicable):
- ☐ DATE ARTICLE 15 CLOSED OUT:
- ☐ DATE CLOSED OUT IN NJP LOG:
- ☐ COPIES: UNIT (1) NJP/TSCH/AD(2) RECONCILIATION

18 April

22 April

18 April

22 April

18 April

22 April

11

DELIVERED 28 APR 03

23 APR 03 1730

23 April

29 April

29 April

29 April

29 April

29 April

29 April

29 April

29 April

29 April

29 April

29 April

29 April

29 April

29 April

29 April



DEPARTMENT OF DEFENSE
JOINT TASK FORCE GTMO
GUANTANAMO BAY, CUBA
APO AE 09360

JTF GTMO - SJA

14 April 2003

MEMORANDUM FOR MG Miller, Commander, JTF Guantanamo, Guantanamo Bay Cuba

SUBJECT: Legal Review, Informal AR 15-6 Investigation

1. I have reviewed the informal AR 15-6 investigation initiated on 10 April 2003, to consider actions taken by members of the 132nd MP CO and find no legal objection. The findings and recommendations are suitable for consideration for final action.
2. The proceedings comply with all legal requirements of AR 15-6 and other applicable guidance (e.g., Article 31, UCMJ). No errors are apparent on the face of this investigation.
3. There is sufficient evidence to support each finding by the Investigating Officer. Witness interviews were conducted which lend credible support to each and every finding.
4. The recommendations are consistent with the findings. The Investigating Officer's recommendations provide sufficient suggested corrective action.

[REDACTED]
LTC, USA
Staff Judge Advocate

00085

REPORT OF PROCEEDINGS BY INVESTIGATING OFFICER/BOARD OF OFFICERS

For use of this form, see AR 15-6; the preparatory agency is OJAG.

IF MORE SPACE IS REQUIRED IN FILLING OUT ANY PORTION OF THIS FORM, ATTACH ADDITIONAL SHEETS**SECTION I - APPOINTMENT**Appointed by [REDACTED] USA, Chief of Staff

(Appointing authority)

on **10 APR 03**
(Date)

(Month inclusive 1: Letter of appointment or summary of oral appointment date.) (See para 3-15, AR 15-6.)

SECTION II - SESSIONSThe investigation board commenced at **Guantanamo Bay, Cuba**

(Place)

on **10 APR 03**
(Date)

on **10 APR 03** (If a formal board met for more than one session, check here ☐. Indicate in an enclosure the time each session began and ended, the place, persons present and absent, and explanation of absence, if any.) The following persons (members, respondents, counsel) were present: (after each name, indicate capacity, e.g., President, Recorder, Member, Legal Advisor.)

The following persons (members, respondents, counsel) were absent: (Include brief explanation of each absence.) (See paras 3-2 and 3-8a, AR 15-6.)

The investigating officer (board) finished gathering/hearing evidence at

1200
(Time)

on

14 APR 03
(Date)

and completed findings and recommendations at

1430
(Time)

on

14 APR 03
(Date)**SECTION III - CHECKLIST FOR PROCEEDINGS****A. COMPLETE IN ALL CASES**

1. Inclosure (para 3-15, AR 15-6)

Are the following inclosed and numbered consecutively with Roman numerals: (Attached in order listed)

a. The letter of appointment or a summary of oral appointment date?

b. Copy of notice to respondent, if any? (See item 2, below)

c. Other correspondence with respondent or counsel, if any?

d. All other written communications to or from the appointing authority?

e. Privacy Act Statements (Written, if answers provided orally?)

f. Explanation by the investigating officer or head of any unusual delays, difficulties, irregularities, or other problems encountered (e.g., absence of material witnesses)?

g. Information as to location of a formal board not included on page 3 of this report?

h. Any other significant papers, notes, or exhibits relating to administrative aspects of the investigation or board?

FOOTNOTES: 1. Exclude all negative answers or an omitted sheet.

2. Use of any 14th column indicates a positive representation that the circumstances described in the question did not occur in this investigation or board.

YES	NO
	X

DA FORM 1574, MAR 83

SECTION OF NOV 77 IS OBSOLETE.

Page 3 of 4

00086

Does the evidence describe how they found? ☐ themselves with this evidence: (para 3-24, AR 15-4)

2 Exhibit: (para 3-16, AR 15-4)

- Are all items offered (whether or not received) or considered as evidence individually numbered or labeled as exhibits and attached to this report?
- Is an index of all exhibits offered to or considered by investigating officer or board attached before the first exhibit?
- Has the testimony of each witness been recorded verbatim or have relevant portions been reduced to writing and attached as an exhibit?
- Are copies, descriptions, or depictions (if submitted for use as documentary evidence) properly substantiated and is the location of the original evidence indicated?
- Are descriptions or diagrams included of locations visited by the investigating officer or board (para 3-46, AR 15-4)?
- In each witness stipulation attached as an exhibit and in each oral stipulation, either reduced to writing and made an exhibit or recorded in a verbatim record?
- If official notice of any matter was taken over the objection of a respondent or counsel, is a statement of the matter of which official notice was taken attached as an exhibit (para 3-104, AR 15-4)?

3 Was a quorum present when the board voted on findings and recommendations (para 4-4 and 5-2b, AR 15-4)?

B. COMPLETE ONLY FOR FORMAL BOARD PROCEEDINGS (Chapter 5, AR 15-4)

- At the initial session, did the recorder read, or determine that all participants had read, the letter of appointment (para 5-36, AR 15-4)?
- Was a quorum present at every session of the board (para 5-2b, AR 15-4)?
- Was each member of any member properly sworn (para 5-2a, AR 15-4)?
- Were members, witnesses, reporter, and interpreter sworn, if required (para 3-1, AR 15-4)?

C. COMPLETE ONLY IF RESPONDENT WAS DESIGNATED (Section II, Chapter 5, AR 15-4)

9 Notice to respondent (para 5-6, AR 15-4):

- Is the method and date of delivery to the respondent indicated on each letter of notification?
- Was the date of delivery at least ten working days prior to the first session of the board?
- Does each letter of notification indicate -
 - the date, hour, and place of the first session of the board concerning the respondent?
 - the matter to be investigated, including specific allegations against the respondent, if any?
 - the respondent's rights with regard to counsel?
 - the names and address of each witness expected to be called by the recorder?
 - the respondent's right to be present, present evidence, and call witnesses?
- Was the respondent provided a copy of all unclassified documents in the case file?
- If there were relevant classified materials, were the respondent and his counsel given access and an opportunity to examine them?

10 If any respondent was designated after the proceedings began (for otherwise was absent during part of the proceedings):

- Was he properly notified (para 5-5, AR 15-4)?
- Was record of proceedings and evidence received in his absence made available for examination by him and his counsel (para 5-4c, AR 15-4)?

11 Counsel (para 5-6, AR 15-4):

- Was each respondent represented by counsel?
- Name and business address of counsel:

(If counsel is a lawyer, check here ☐)

- Was respondent's counsel present at all open sessions of the board relating to this respondent?
- If military counsel was requested but not made available, is a copy (or, if oral, a summary) of the request and the action taken on it included in the report (para 5-6b, AR 15-4)?

12 If the respondent challenged the legal advice or any voting member for lack of impartiality (para 5-7, AR 15-4):

- Was the challenge properly denied and by the appropriate officer?
- Did each member immediately discontinue action to participate in the proceedings?

13 Was the respondent given an opportunity to (para 5-8a, AR 15-4):

- Be present with his counsel at all open sessions of the board which deal with any matter which concerns that respondent?
- Examine and object to the introduction of oral and documentary evidence, including witness statements?
- Object to the testimony of witnesses and cross-examine witnesses other than his own?
- Call witnesses and otherwise introduce evidence?
- Testify as a witness?
- Make or have his counsel make a final statement or argument (para 5-9, AR 15-4)?

14 If requested, did the recorder assist the respondent in obtaining evidence in possession of the Government and in arranging for the presence of witnesses (para 5-4b, AR 15-4)?

15 Are all of the respondent's requests and objections which were denied indicated in the report of proceedings or in an addendum or exhibit to it (para 5-11, AR 15-4)?

FOOTNOTES: If Explain all negative answers on an attached sheet.

If any of the 151 checkboxes contains a positive representation that the circumstances described in the question did not occur in the investigation or board.

YES NO/NA

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

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X

X

X

X

X

X

X

X

X

X

SECTION IV - FINDINGS (para 3-10, AR 15-6)

The (investigating officer) (board), having carefully considered the evidence, finds:

1. Neither [REDACTED] secured the door to Cell #15 after returning [REDACTED] therein.
2. The door to Cell #15 was unsecured for approximately two hours without being noticed by any Sierra Block guard team member.
3. [REDACTED] was nearly successful in locking all four Sierra Block guard team members into Cell #21 because the entire guard team was standing in or near Cell #21 with their attention exclusively focused into the cell and on the search in progress.
4. The force used to subdue [REDACTED] was appropriate until he was shackled. [REDACTED] attacked [REDACTED] after he was restrained by striking him with his fist.
5. Witness testimony indicates that, although infrequent, detainee cells have been left unlocked on prior occasions.

SECTION V - RECOMMENDATIONS (para 3-11, AR 15-6)

In view of the above findings, the (investigating officer) (board) recommends:

1. That the JDOG Command consider appropriate administrative and/or disciplinary action against [REDACTED] for dereliction of duty under Article 92, UCMJ, and against [REDACTED] for assault against [REDACTED] under Article 123, UCMJ.
2. That refresher training in block safety and security procedures be provided to all JDOG personnel.
3. That all lockplates be painted a color that will sufficiently contrast the lockplate from the lock to ease visual inspection.

SECTION VI - AUTHENTICATION (para 2-17, AR 15-6)

THIS REPORT OF PROCEEDINGS IS COMPLETE AND ACCURATE. (If any voting member or the recorder fails to sign here or in Section VII below, indicate the reason in the space where his signature should appear.)

(Recorder)

(Investigating Officer) (President)

(Member)

(Member)

(Member)

(Member)

SECTION VII - MINORITY REPORT (para 2-12, AR 15-6)

To the extent indicated in Inclosure _____, the undersigned do(es) not concur in the findings and recommendations of the board. (In the inclosure, identify by number each finding and/or recommendation in which the dissenting member(s) do(es) not concur. State the reasons for disagreement. Additional/substantive findings and/or recommendations may be included in the inclosure.)

(Member)

(Member)

SECTION VIII - ACTION BY APPOINTING AUTHORITY (para 2-1, AR 15-6)

The findings and recommendations of the (Investigating officer) (board) are (approved) (disapproved) (approved with following exceptions/ substitutions). (If the appointing authority returns the proceedings to the investigating officer or board for further proceedings or corrective action, attach that correspondence (or a summary, if oral) as a numbered inclosure.)

The findings and recommendations of the Investigating Officer are approved. Return to Colonel McQueen, JDOG Commander, for appropriate action as recommended by Investigating Officer.

Jeff D. Miller
JEFFREY D. MILLER, MG, USA, COMMANDER

EXHIBIT INDEX

1. Preliminary Report of Investigation - Prepared by [REDACTED] 12 APR 03
2. Diagram of Sierra Block - Prepared by [REDACTED] 12 APR 03
3. Diagram of Cell Lock Configuration - Prepared by [REDACTED] 12 APR 03
4. Sierra Block Log - 10 APR 03
5. Statement of [REDACTED] 132nd MP CO
6. Statement of [REDACTED] 132nd MP CO
7. Statement of [REDACTED] 132nd MP CO
8. Statement of [REDACTED] 132nd MP CO
9. Statement of [REDACTED] 132nd MP CO
10. Statement of [REDACTED] 132nd MP CO
11. Statement of [REDACTED] 132nd MP CO
12. Statement of [REDACTED] 132nd MP CO
13. Statement of [REDACTED] 132nd MP CO
14. Statement of [REDACTED] 132nd MP CO
15. Statement of [REDACTED] 132nd MP CO
16. Statement of [REDACTED] 132nd MP CO
17. Statement of [REDACTED] 132nd MP CO
18. Statement of [REDACTED] 132nd MP CO
19. Statement of [REDACTED] JDOG - Linguist
20. Statement of [REDACTED] 132nd MP CO

**Preliminary Report of Investigation
Events on Sierra Block of 10 April 2003**

Sierra Block Team:



Approximately 1630:

- [REDACTED] return [REDACTED] to cell 15. [REDACTED] belonged in cell 16.)
- [REDACTED] the shackle man and [REDACTED] holds the keys to the cell padlock.
- Neither [REDACTED] can conceive of not having locked the cell door.
- Neither [REDACTED] can definitively state the door was locked.

Examination of the cell and cell door by [REDACTED] upon arrival revealed the door to be open with the padlock engaged through the receiver under the lockplate. Both beam holes were closed and secured by D-rings. Videotape taken immediately after the event shows the same door configuration.

1630 to 1830:

- Block team members rotate to chow.

Approximately 1830:

- [REDACTED] notices that detainee in cell 21 has contraband food. The detainee refuses to surrender the food to either [REDACTED]
- [REDACTED] returns from chow and is briefed by [REDACTED] about contraband in cell 21. [REDACTED] directs cell search.
- [REDACTED] place three-piece suit on detainee in cell 21 and move him to cell 29.
- [REDACTED] begins search of cell 21.
- Having secured the detainee in cell 29, [REDACTED] return to cell 21. [REDACTED] enters cell 21 and [REDACTED] stands in the doorway.

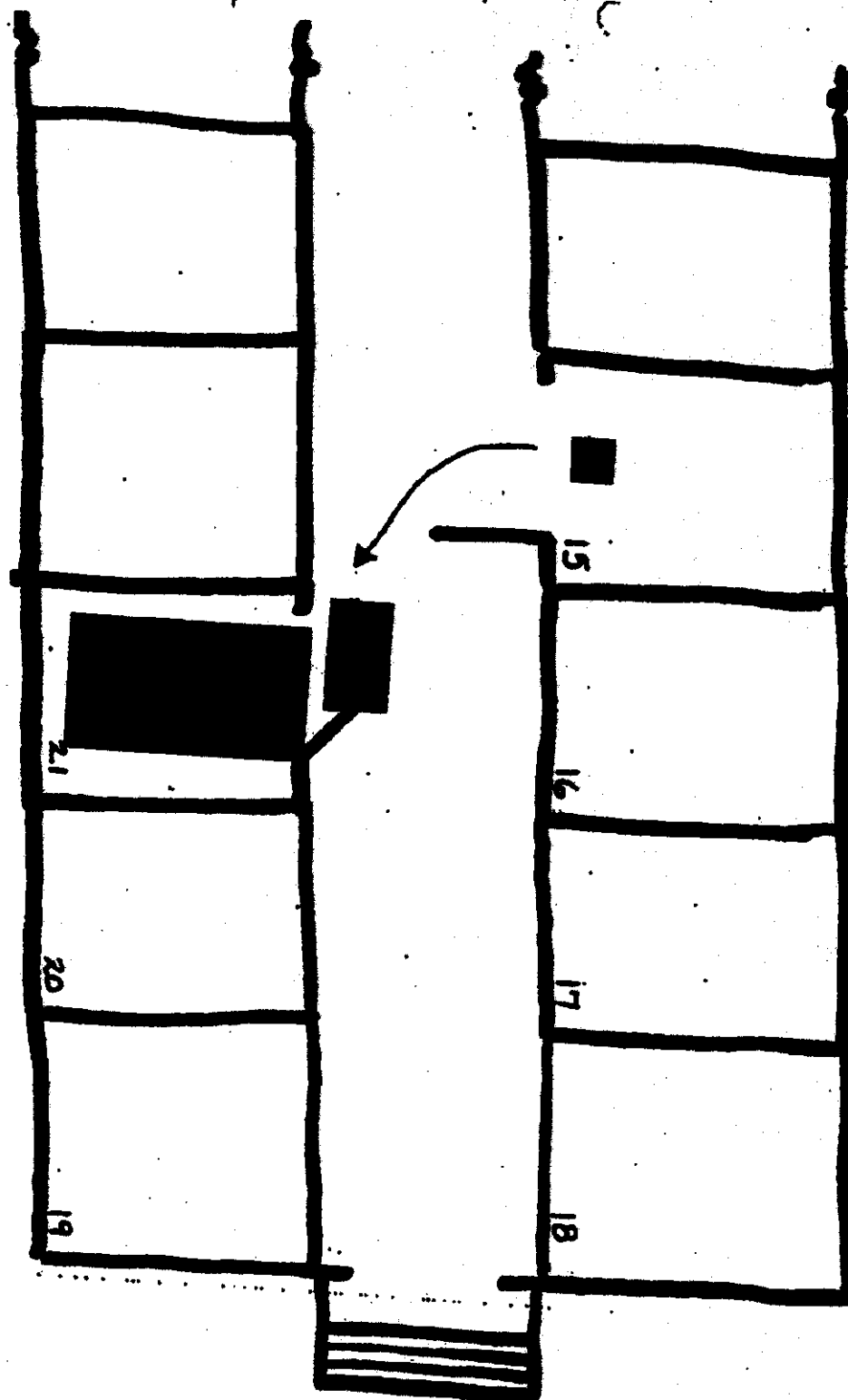
Approximately 1835:

- [REDACTED] are inside cell 21. [REDACTED] is standing in the doorway. [REDACTED] is standing outside but near the door. All the men are looking into the cell.
- [REDACTED] exits cell 15 and pushes [REDACTED] into cell 21.
- [REDACTED] prevents the door to cell 21 from being closed by forcing his arm outside. He squeezes his head and torso out of the cell and is punched in the face by [REDACTED] losing a tooth.
- The men push the door open and all four begin to subdue [REDACTED]

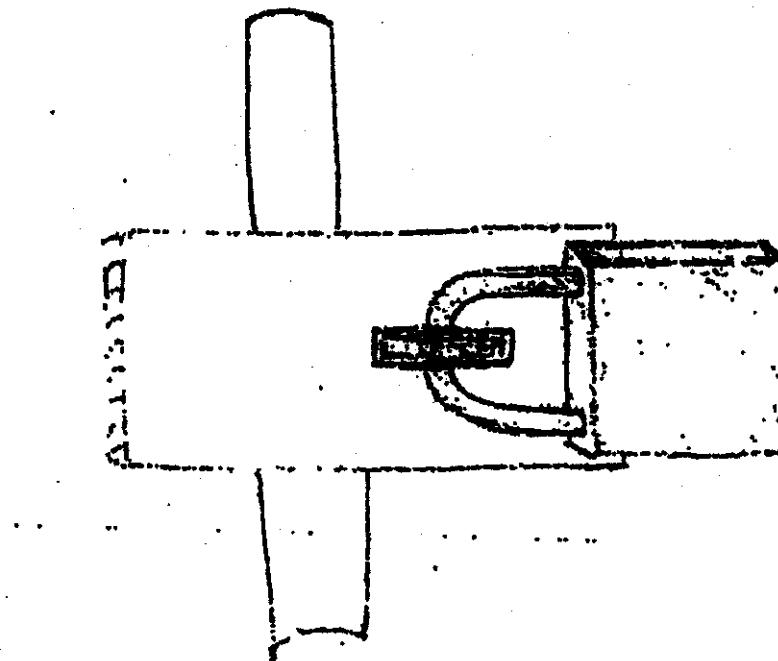
- [REDACTED] thumps his teeth into [REDACTED] arm and does not release until [REDACTED] twice strikes him in the head with his radio. *These blows likely cause the lacerations to the back of [REDACTED] scalp.*
- Others arrive and assist in subduing and shackling [REDACTED]
- Just as the shackling process is being completed, [REDACTED] becomes extremely agitated and begins yelling "you bit me! You bit me!". [REDACTED] strikes [REDACTED] and is immediately pulled away and assisted off the block.
- [REDACTED] is transported to medical.

Conclusions:

- Neither [REDACTED] secured the door to cell 15 after placing [REDACTED] therein.
- That the door to cell 15 was unsecured for approximately two hours went unnoticed by all Sierra block team members.
- [REDACTED] was nearly successful in locking all Sierra block team members into cell 21 because the men were all standing in or near cell 21 and their attention was focused into the cell and at the search being conducted.

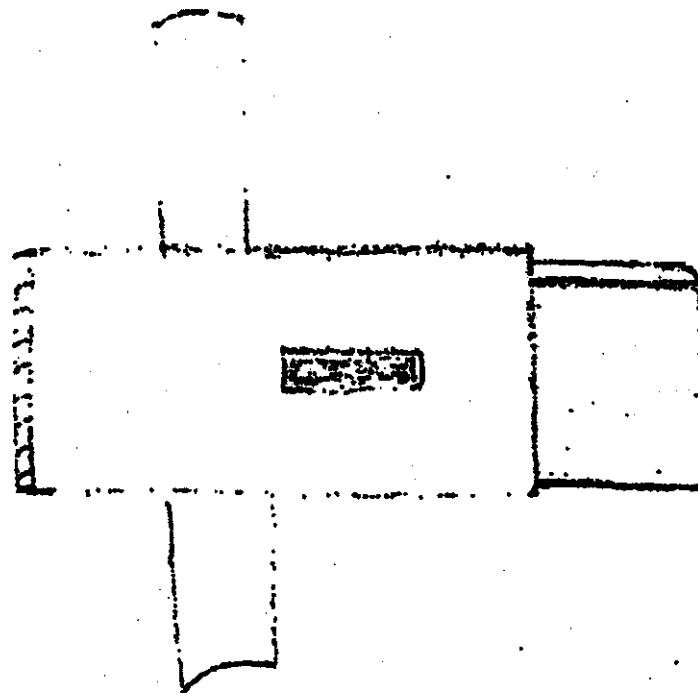


00093



SECURED

1. LOCKPLATE DOWN OVER RECEIVER.
2. PADLOCK SHACKLE THROUGH RECEIVER.



NOT SECURED

1. PADLOCK SHACKLE THROUGH RECEIVER.
2. LOCKPLATE DOWN OVER PADLOCK AND RECEIVER.

10 April 03

(Day)

0600 - 1400

0600. Assumed Duties 4 'S' Block. Head Count. 234. 23P.

0601. Medics on block.

0604. Breakfast for the detainees Arrived.

0605. PL2 on Block.

0610 - PL2 out of block.

0611. Prisoner out block.

0700 - Detainees # [redacted] request shower and AC.

0700. Detainee # [redacted] has a Strab. Dist. He has not read a note.
Note. has food comes from Doc.

0900 Personal from Dental to see [redacted] and [redacted]

0913. Plaintiff's personal to for [redacted] mail.

0920. Hairbrushes personal out

0925. Medical escort taking [redacted] to medical.

0927. Escort from ECLC-1 taking [redacted] to FCLC. He appeared.

1001. Medic on block. S:18 request Medication.

100 Start the lunch procedures for detainees

130 Finish with lunch procedures.

1200 Detainee # [redacted] request Arabic interpreter.

1235. Arabic interpreter on block.

1300 Head Count 234, 23P.

3959 END OF 94 FT

Nothing Follows

EXHIBIT 4

1400 hrs SUMMER 10 APR03 Thursday.

220

[REDACTED] ASSAMAS' DATES as Block SGT
conducted Head-count. 23A/23 p received keys
ASSIGNED by [REDACTED], and [REDACTED]

- 9

225

1830 -

take over block due to incident that
occured. Refer to 1594 for information
on today's activities.

2100 - Chow served for detainees all
refused except [REDACTED]

2135 - A photo copy of the 1594 will be at
CPZ for reference

2225⁰⁰ - relieved by mids

Nothing

Else

Follows

2200 Hrs Mids 10 April 03

- [REDACTED]
assume duty 23 HOURS
[REDACTED] at Hospital [REDACTED] at Reservation
All keys accounted for

- 2230 - Medic on block - [REDACTED]
refuse meds
MWD 2300

- 2345 - SOG Enters block - Leaves 2350
- 0045 Commander of Guard on site
- 0545 Released by [REDACTED] DAYS

NOTHING TO FOLLOW

SWORN STATEMENT

For use of this form, see AR 190-41; the processing agency is DODIG.

PRIVACY ACT STATEMENT

Tape 10 USC Source 30; Tape 5 USC Source 259; E O 9397 dated November 22, 1943 5324

▲ 香港回歸後，香港與祖國的關係，是「一國兩制」。

PRINCIPAL PURPOSE:

ADDITIONAL INFO:

DISCLOSURE:

to present commanders and law enforcement officials with means by which offenders may be more easily identified.

Further, the majority appears to take it as axiomatic that the means of identifying an individual (they just say "and")

Disclosure of your social security number is voluntary

1. LOCATIONS

Temp ALTA SODA Block

12. DATE OF COMPLETION: 12/2/80

LEAD, 45 10

Abstract

21

4. FILE NUMBER:

13. CLASSIFICATION

NE-4

4. ~~DISCUSSION OF RESULTS~~

132. ~~Top~~ Cn

WANT TO MAKE A LONG-TERM STATEMENT ABOUT DATA

ON approx. around 1835 I [redacted] came back to [redacted] block
 from Chow was [redacted] by [redacted] That [redacted] had
 me peanuts in his cell eating them. when asked to give
 the peanuts to him the Detainer Refused I'm not done with
 them. I [redacted] [redacted] to get a 3 piece
 suit, and that we were going to search [redacted] cell for
 any more contraband. [redacted] Then placed the three
 piece suit on the Detainer then escorted [redacted] to [redacted] to
 of my memory. I began the cell search and found a
 of contraband (casseres, one plug cellars, and peanut butter) while I was
 still progressing the cell search, to my best memory [redacted]
 came in the cell to help with the search. I was work
 under the bunk where all of the laundry out of the cove
 of my eye, I saw [redacted] fly in to the cell. I look
 towards to door and I saw a Detainer out side of the
 door trying to close the hatch, with out realizing it, a
 lone of us was in the cell. I then pushed the door w
 all of my might (also had help) until I got my arm outside
 the door. I forced my way out at that time the de
 punched me in my mouth knocking out my bridge work &
 cutting my upper lip.

SECRET

4.1. INITIAL SET-UP AND INITIAL DATA COLLECTION

PAGE 1 OF 2

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF

TAKEN AT _____ **DATE** _____

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE IN

14 FROM 2123 DEC 1967

DATE: 10/10/74 TIME: 12:00PM

00098

STATEMENT OF

TAKEN AT Camp DELTA DATE 2003 Apr 10

2. STATEMENT OF WORK

from my best memory [redacted] grabbed The Detainee around his neck (head lock) [redacted] and [redacted] then to the Detainee down to the floor. The Detainee was fighting, as if he really wanted to hurt us. [redacted] then. [redacted] took the radio and called for backup. Once the

DETAINER WAS SOMEWHAT SECURE

so fast very hard to believe. we all saved each other
lives in my opinion I don't know how the Retiree
got out of his cell. 11

CONCLUSION

WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 2. I HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF GAIN OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, INFLUENCE, OR INDUCEMENT. ON MY OWN VOLUNTARY

Signature of Person Making Statement

UNIT 10 测试卷

Submitted and sworn to before me, a person authorized by law to administer oaths, this 10th day of April

at Camp Delta, Guantanamo Bay, Cuba

ORGANIZATION OF REPORT

DREAMIZATION OF WORKERS

INITIALS OF PERSON MAKING STATEMENT

Ant 136 (b) (4) UCMJ

PAGE 2 OF 2 PAGES

OATH STATEMENT

For use of the form, see AR 150-45, the program agency is HRCISPS

PRIVACY ACT STATEMENT

Title 18 USC Section 307; Title 5 USC Section 706; E.O. 12958 dated November 22, 1993

To protect commanders and law enforcement officials with means by which information may be internally shared
Your social security number is used as an administrative means of identification to indicate they are valid.

Disclosure of your social security number is voluntary

AUTHORITY:
PRINCIPAL PURPOSE:
ROUTINE USES:
DISCLOSURE:

1. LOCATION

Camp Delta Guantanamo Bay, 2003/04/10 2055

2. NAME FIRST NAME MIDDLE NAME

3. ORGANIZATION OR ADDRESS

139th MP Co

I WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH

I [redacted] while participating in a cell
 search was almost locked up in a cell by detainees with [redacted] and [redacted] Black [redacted]
 and [redacted] stopped said detainee
 from closing door. [redacted] subduing
 detainee to floor. [redacted] GRABBED Detainees legs
 and pulled them out from under him, [redacted]
 on detainee's back when he was on floor until
 back up arrived, [redacted] holding on to detainee
 so he could not get up. Back up had to grab
 [redacted] to make [redacted] let go by the arm. [redacted] Then
 got up and tried to help with [redacted] but was told
 to go back to Block and help [redacted] team mates.
 Nothing Follows [redacted]

10. EXHIBIT

INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF

2

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF

TAKEN AT

DATED

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED.

DA FORM 2023, DEC 1998

DA FORM 2023, JUL 72, 10 9000000

00100

STATEMENT OF

B. STATEMENT

Not
used

AFFIDAVIT
I HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT
WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE
BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS
STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNDUE INFLUENCE, OR UNLAWFUL INDEUCEMENT

WITNESSES:

ORGANIZATION OR ADDRESS

ORGANIZATION OR ADDRESS

INITIALS OF PERSON MAKING STATEMENT

PAGE 2 OF FORM 7023, DEC 1989

Subscribed and sworn to before me, a person authorized by law to

administer oaths, this

12th day of Apr 2003
at Carson Delta County, the said

(Signature of Person Making Statement)

(Typed Name of Person Administering Oath)

At 136 (h) 40 WCMT
Secretary To the Board of Directors

PAGE 2 OF 2 PAGES

SWORN STATEMENT

For use of the form, see AR 190-42; the present agency is GOCSDPS

PRIVACY ACT STATEMENT

AUTHORITY:

Title 48 USC Section 201; Title 5 USC Section 206; E.O. 12958 dated November 22, 1983, 22540

PRINCIPAL PURPOSE:

To provide commanders and law enforcement officials with means by which information may be accurately obtained

ROUTINE USES:

Your social security number is used as an administrative identification number for the purpose of identifying you for the purpose of the statement

DISCLOSURE:

Disclosure of your social security number is voluntary.

1. LOCATION

2. DATE

3. TIME

4. FILE NUMBER

5. LAST NAME

6. FIRST NAME

7. GRADE/STATUS

8. SIGNATURE

9. PRINT NAME

10. ADDRESS

11. CITY

12. STATE

13. ZIP

14. PHONE

15. FAX

16. E-MAIL

17. SIGNATURE

18. PRINT NAME

19. ADDRESS

20. CITY

21. STATE

22. ZIP

23. PHONE

24. FAX

25. E-MAIL

26. SIGNATURE

27. PRINT NAME

28. ADDRESS

29. CITY

30. STATE

31. ZIP

32. PHONE

33. FAX

34. E-MAIL

35. SIGNATURE

36. PRINT NAME

37. ADDRESS

38. CITY

39. STATE

40. ZIP

41. PHONE

42. FAX

43. E-MAIL

44. SIGNATURE

45. PRINT NAME

46. ADDRESS

47. CITY

48. STATE

49. ZIP

50. PHONE

51. FAX

52. E-MAIL

53. SIGNATURE

54. PRINT NAME

55. ADDRESS

56. CITY

57. STATE

58. ZIP

59. PHONE

60. FAX

61. E-MAIL

62. SIGNATURE

63. PRINT NAME

64. ADDRESS

65. CITY

66. STATE

67. ZIP

68. PHONE

69. FAX

70. E-MAIL

71. SIGNATURE

72. PRINT NAME

73. ADDRESS

74. CITY

75. STATE

76. ZIP

77. PHONE

78. FAX

79. E-MAIL

80. SIGNATURE

81. PRINT NAME

82. ADDRESS

83. CITY

84. STATE

85. ZIP

86. PHONE

87. FAX

88. E-MAIL

89. SIGNATURE

90. PRINT NAME

91. ADDRESS

92. CITY

93. STATE

94. ZIP

95. PHONE

96. FAX

97. E-MAIL

98. SIGNATURE

99. PRINT NAME

100. ADDRESS

101. CITY

102. STATE

103. ZIP

104. PHONE

105. FAX

106. E-MAIL

107. SIGNATURE

108. PRINT NAME

109. ADDRESS

110. CITY

111. STATE

112. ZIP

113. PHONE

114. FAX

115. E-MAIL

116. SIGNATURE

117. PRINT NAME

118. ADDRESS

119. CITY

120. STATE

121. ZIP

122. PHONE

123. FAX

124. E-MAIL

125. SIGNATURE

126. PRINT NAME

127. ADDRESS

128. CITY

129. STATE

130. ZIP

131. PHONE

132. FAX

133. E-MAIL

134. SIGNATURE

135. PRINT NAME

136. ADDRESS

137. CITY

138. STATE

139. ZIP

140. PHONE

141. FAX

142. E-MAIL

143. SIGNATURE

144. PRINT NAME

145. ADDRESS

146. CITY

147. STATE

148. ZIP

149. PHONE

150. FAX

151. E-MAIL

152. SIGNATURE

153. PRINT NAME

154. ADDRESS

155. CITY

156. STATE

157. ZIP

158. PHONE

159. FAX

160. E-MAIL

161. SIGNATURE

162. PRINT NAME

163. ADDRESS

164. CITY

165. STATE

166. ZIP

167. PHONE

168. FAX

169. E-MAIL

170. SIGNATURE

171. PRINT NAME

172. ADDRESS

173. CITY

174. STATE

175. ZIP

176. PHONE

177. FAX

178. E-MAIL

179. SIGNATURE

180. PRINT NAME

181. ADDRESS

182. CITY

183. STATE

184. ZIP

185. PHONE

186. FAX

187. E-MAIL

188. SIGNATURE

189. PRINT NAME

190. ADDRESS

191. CITY

192. STATE

193. ZIP

194. PHONE

195. FAX

196. E-MAIL

197. SIGNATURE

198. PRINT NAME

199. ADDRESS

200. CITY

201. STATE

202. ZIP

203. PHONE

204. FAX

205. E-MAIL

206. SIGNATURE

207. PRINT NAME

208. ADDRESS

209. CITY

210. STATE

211. ZIP

212. PHONE

213. FAX

214. E-MAIL

215. SIGNATURE

216. PRINT NAME

217. ADDRESS

218. CITY

219. STATE

220. ZIP

221. PHONE

222. FAX

223. E-MAIL

224. SIGNATURE

225. PRINT NAME

226. ADDRESS

227. CITY

228. STATE

229. ZIP

230. PHONE

231. FAX

232. E-MAIL

233. SIGNATURE

234. PRINT NAME

235. ADDRESS

236. CITY

237. STATE

238. ZIP

239. PHONE

240. FAX

241. E-MAIL

242. SIGNATURE

243. PRINT NAME

244. ADDRESS

245. CITY

246. STATE

247. ZIP

248. PHONE

249. FAX

250. E-MAIL

251. SIGNATURE

252. PRINT NAME

253. ADDRESS

254. CITY

255. STATE

256. ZIP

257. PHONE

258. FAX

259. E-MAIL

260. SIGNATURE

261. PRINT NAME

262. ADDRESS

263. CITY

264. STATE

265. ZIP

266. PHONE

267. FAX

268. E-MAIL

269. SIGNATURE

270. PRINT NAME

271. ADDRESS

272. CITY

273. STATE

274. ZIP

275. PHONE

276. FAX

277. E-MAIL

278. SIGNATURE

279. PRINT NAME

280. ADDRESS

281. CITY

282. STATE

283. ZIP

284. PHONE

285. FAX

286. E-MAIL

287. SIGNATURE

288. PRINT NAME

289. ADDRESS

290. CITY

291. STATE

292. ZIP

293. PHONE

294. FAX

295. E-MAIL

296. SIGNATURE

297. PRINT NAME

298. ADDRESS

299. CITY

300. STATE

301. ZIP

302. PHONE

303. FAX

304. E-MAIL

305. SIGNATURE

306. PRINT NAME

307. ADDRESS

308. CITY

309. STATE

310. ZIP

311. PHONE

312. FAX

313. E-MAIL

314. SIGNATURE

315. PRINT NAME

316. ADDRESS

317. CITY

318. STATE

319. ZIP

320. PHONE

321. FAX

322. E-MAIL

STATEMENT OF

TAKEN AT Cambridge MA DATED 2003 April 18

1. STATEMENT opened the door. Charged the door.
and was struck in the mouth by the detainee. the ms
of us came behind trying to take the
detainee to the floor. I had his head and left
arm, he started biting me and I struck him
with the radio twice. then I got into the radio and
called for help and medical. After everyone showed
up, I was called off the block. /// End of statement!

nothing follows

18 April 2003

AFFIDAVIT

_____, HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT
WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE _____. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE
BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS
STATEMENT FREELY WITHOUT HOPE OF GAIN OR REWARD, WITHOUT FEAR OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

Signature of Person Making Statement

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to
administer oaths, this 18 day of April, 2003
at Cambridge (b)(4) MA

ORGANIZATION OR ADDRESS

ORGANIZATION OR ADDRESS

INITIALS OF PERSON MAKING STATEMENT

FORM 3, DA FORM 2023, DEC 1999

(Typed Name of Person Administering Oath)
Art. 136 (b)(4) u.m.i.
(Typed Name of Person Administering Oath)

PAGE 2 OF 2 PAGES

SWORN STATEMENT

For use of this form, see AR 190-45; the proposed agency is DDCSDPS

PRIVACY ACT STATEMENT

Title 10 USC Section 363; Title 5 USC Section 2851; E.O. 13526 dated November 22, 1943 /SSM.

AUTHORITY:

PRINCIPAL PURPOSE:

ROUTINE USES:

DISCLOSURE:

To provide commanders and law enforcement officials with means by which information may be accurately checked.

Your social security number is used as an additional/shoreline means of identification to facilitate filing and retrieval.

Disclosure of your social security number is voluntary.

1. LOCATION:

5" Block Camp Delta

2. DATE (YYYYMMDD):

Dec 3 04 10

3. TIME:

1930

4. FILE NUMBER:

5. LAST NAME, FIRST NAME, MIDDLE NAME:

6. ORGANIZATION OR ADDRESS:

173. MP Co (GTMU) Camp Delta II

I WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

Upon returning from being called for a possible IRF on "N" block, I went to the shower and Rec area to help continue with shower and Rec. I took over the cutting of the detainees. Detainees [redacted] and [redacted] were in the Rec yard, but returned to the shower. While in the Rec yard, Detainees [redacted] had been told twice by [redacted] not to practice martial arts while in the Rec yard. Detainees [redacted] and Detainees [redacted] were both properly secured in a Splice suit with the Rec door was open. Splice suit was put on through the bean hole in the Rec door, and each detainee was moved across a time. They were the last 2 detainees for shower & Rec. Being the shacklemaster, I was responsible in shackling and unshackling the detainees through the bean hole. I do not remember who assisted me in moving the detainees to the cell. They were responsible for locking the cell door. However, I would not of left them without knowing if the detainee was properly secured in their cell. Upon walking the block, we noticed several detainees had items in their cells that were not authorized for Level 4 detainees. We made some notes on each one, waiting to secure the items until all members of the block had returned from shower. [redacted] had the most contraband, therefore we decided to do him first we put him in a Splice suit through the bean hole, and secured him in an empty cell approx. 7-10 cells away. He was locked in the cell, still in his Splice suit. Upon entering [redacted] cell, [redacted] went in, [redacted] went in, and I went in. [redacted] was at the door way of the cell. I immediately looked in the toilet and flushed it. I then bent down to go up under the bed when I noticed Detainee [redacted] push [redacted] into the cell from behind, and attempt to lock us in.

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF

2 11

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF

TAKEN AT

DATED

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED.

DA FORM 2822, JUL 72, IS OBSOLETE

00104

STATEMENT OF

TAKEN AT

Camp Delta I DATED 20030410

B. STATEMENT Continued

_____ began to push against the door causing it to swing open. The door swung to the left, causing them to almost fall out towards the right, which knocked Detainer _____ towards the left. I came out of the cell. Detainer _____ was standing there ready to fight. I charged him swinging as he did to me. At that time, _____ and _____ then charged the detainer _____ from the left. Detainer _____ was fighting us with a major vigilance. He was punching, kicking, biting. At this time, other detainees were yelling, we got _____ to the ground. He was still fighting, kicking and biting. Either _____ or _____ was radioing in for assistance. Within about 10 minutes, a few escort teams came in with shackles and as they shackled the part of him we were holding, we were told to get back as they now had control. He fought the whole time. As we were walking off the block, about 60 ap's rushed in to help regain control of the block, making sure that all bean holes and locks were properly secured. ///

End of Statement

—//

AFFIDAVIT

_____, HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE _____. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, INTIMIDATION, INFLUENCE OR UNLAWFUL INDOUCEMENT.

Signature of Person Making Statement

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 10 day of April, 2003.

Camp Delta I

Signature of Prison Administrative Official

ORGANIZATION OR ADDRESS

ORGANIZATION OR ADDRESS

INITIALS OF PERSON MAKING STATEMENT

APR 13 2004, UCMJ
(Authority To Administer Oaths)

STATEMENT OF

TAKEN AT **CAMP DELTA**

DATED **10 APRIL 2003**

9. STATEMENT *Command*

NOTHING FOLLOWS

NOT USED

AFFIDAVIT

_____, HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE OR UNLAWFUL INDUCEMENT.

(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 10th day of April, 2003
at Camp Delta, Guantanamo Bay, Cuba

(Signature of Person Administering Oath)

ORGANIZATION OR ADDRESS

ORGANIZATION OR ADDRESS

INITIALS OF PERSON MAKING STATEMENT

PAGE 1, DA FORM 3023, DEC 1999

PAGE 2 OF 2 PAGES

00107

SWORN STATEMENT

For use of the form, see AF 150-45; the program agency is ODCSPS

PRIVACY ACT STATEMENT

Title 40 USC Section 301; Title 5 USC Section 2951, E.O. 9397 dated November 22, 1993 (SSN)

To provide commanders and law enforcement officials with means by which information may be securely stored

Your social security number is used as an administrative means of identification as to identity being and special

Disclosure of your social security number is voluntary.

AUTHORITY:

PRINCIPAL PURPOSE:

ROUTINE USES

DISCLOSURE:

1. LOCATION

Camp Delta

5. LAST NAME, FIRST NAME, MIDDLE NAME

3. ORGANIZATION ADDRESS

1320 MP CO

2. DATE (YYYYMMDD)

10 APR 03

3. TIME

2032

4. FLT NUMBER

7. GRADE/STATUS

I WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH

On 10 APR 03 while performing my duties as [REDACTED] at Camp Delta. My [REDACTED] and I were coming out of Lima block in Camp Delta II. I heard a call over the radio from [REDACTED] saying "Sierra Block, we have one cat". Upon hearing the call [REDACTED] and I [REDACTED] was let off of Lima block and ran to Sierra. Upon entering the block we met [REDACTED] who was bleeding from the mouth, pointing inside. We ran inside and saw the Detainee on the floor resisting being held down by [REDACTED]. I ran to the left side of the Detainee and secured his neck and arm. I remember seeing [REDACTED] securing a leg [REDACTED] was applying the cuffs. Once medical arrived the Detainee was taken out the rear of the block and put on a stretch and taken to medical. Medical then assumed control of caring for the Detainee. End of Statement [REDACTED]

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF 1

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF"

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED.

DA FORM 2823, DEC 1988

DA FORM 2823, JAN 72, IS OBSOLETE

00108

STATEMENT OF

TAKEN AT

Comp Delta

DATED

10 APR 03

B. STATEMENT (Continued)

Did not

USE

AFFIDAVIT

I, , HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 16th day of Apr 2003 at Comp Delta Washington Bay Center

ORGANIZATION OR ADDRESS

ORGANIZATION OR ADDRESS

INITIALS OF PERSON MAKING STATEMENT

FORM 3, 2A FORM 1022, DEC 1997

Art 136 (b)(4) UCMJ

PAGE 2 OF 2

SWORN STATEMENT

In use at this time, see AFM 100-45; the dependent agency is DDCSOPS

PRIVACY ACT STATEMENT

AUTHORITY:

Title 10 USC Section 301; Title 5 USC Section 205; E.O. 9397 dated November 22, 1943

PRINCIPAL PURPOSE:

To provide commanders and law enforcement officials with means by which information may be accurately identified

ROUTINE USES:

Your social security number is used as an administrative device means of identification to facilitate filing and retrieval

DISCLOSURE:

Disclosure of your social security number is voluntary.

1. LOCATION

Camp Delta

2. DATE (YYMMDD)

2003 04 11

3. TIME

00:24

4. FILE NUMBER

5. LAST NAME, FIRST NAME, MIDDLE NAME

1328 MP CO

[REDACTED]

I WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH

At approx. 18:30 while sitting in chain tent I hear a frantic call for help of the radio. It took a second for me to figure out what was said. But I knew it was "Sewer" block and something was wrong. My SSG [REDACTED] & I were up and running to the block instantly. When I arrived there was 10 to 15 MPs on the block. I went up the steps and down the tent and saw five MPs securing the detainee which was still struggling. I noticed that there was a good bit of blood on the tent floor so I called for medical. [REDACTED] was one of the MPs securing the detainee. [REDACTED] was upset and angry and was yelling and at the detainee. At which time MPs pulled him and proceeded to take him out of the area to cool down. I then started clearing people out of the tent and medical and behind them was an MP w/ a gun. I instructed them both to stand around the block to the back. I went back down the tent as the MPs securing the detainee were taking him out the back to medical. I then pointed [REDACTED] as the new block NCO and him to keep everyone out of the area where the incident happened. [REDACTED] took the soldiers that had blood on them to get checked by medical and I told [REDACTED] to run the block as it. At that time I left the block to check on the soldiers.

OF Statement!

10. EXHIBIT

11. INITIALS OF [REDACTED] STATEMENT

PAGE 10

2

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF"

TAKEN AT

DATED

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED.

DA FORM 2023, DEC 1998

DA FORM 2023, JUL 72, IS OBSOLETE

00110

STATEMENT OF

TAKEN AT

Camp Delta DATED 4/11/03

B. STATEMENT (Continued)

Not used

AFFIDAVIT

I, _____, HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1. AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CONNECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PARAGRAPH. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT UNLAWFUL INFLUENCE.

Signature of Person Making Statement

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 11 day of Apr 03 at Camp Delta

ORGANIZATION OR ADDRESS

Signature of Person Administering Oath

ORGANIZATION OR ADDRESS

(Typed Name of Person Administering Oath)
Art 136 (b)(4) USAF
Secretary To Adjutant General

INITIALS OF PERSON MAKING STATEMENT

PAGE 2 OF 2

PAGE 2 OF FORM 3022 DEC 1999

SWORN STATEMENT

For use of the form 100-45, the appropriate agency is DDCSOPS

PRIVACY ACT STATEMENT

AUTHORITY:

Title 18 USC Section 301 Title 5 USC Section 7951; F.O. 302P dated November 72, 1943 (SSM)

PRINCIPAL PURPOSE:

To provide commanders and law enforcement officials with means by which information may be accurately reported

ROUTING SLIPS:

Your social security number is used as an administrative means of identification to facilitate filing and retrieval

DISCLOSURE:

Disclosure of your social security number is voluntary.

1. LOCATION

CAMP DELTA II

2. DATE (YYYYMMDD)

2003 APR 10

3. TIME

1825

4. FILE NUMBER

5. LAST NAME FIRST NAME MIDDLE NAME

6. DEDUPLICATION ADDRESS

1st and 2nd CO 1st Bn 1st Div 1st Airmar

I WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH

ON THE ABOVE DATE AT APPROXIMATELY 1825 HRS. I WAS ASSIG
TO CAMP II IN THE POSITION OF THE SOG FOR CAMP 2/3.
MYSELF ALONG WITH [REDACTED] WAS GETTING CHOW. W
HEARD SOMEONE FROM SIROM BLOCK CALL FOR ASSISTANCE
WAY OF RADIO. WE RAN TO SIROM BLOCK WHERE WE OBSERVED
SEVERAL MP'S ATTEMPTING TO RESTRAIN A DETAINEE WITH
THREE PIECE SUIT. THE DETAINEE CONTINUED TO RESIST PHYSIC
I RECALL [REDACTED] BEING INVOLVED WITH

PHYSICAL CONTACT WITH THE DETAINEE. THE DETAINEE WAS
ADVISED SEVERAL TIMES BY MYSELF ALONG WITH OTHERS
STOP RESISTING. THE DETAINEE DID NOT COMPLY WITH THE
INSTRUCTIONS. THE MP'S WERE ABLE TO SECURE THE RESTI
UPON THE DETAINEE. I OBSERVED WHAT APPEARED TO ME
THAT [REDACTED] WAS EMOTIONALLY UPSET. I REQUESTED
FOR HIM TO BE ESCORTED FROM THE BLOCK. I CONTINUED
DIRECT MP'S ALONG WITH OTHER SOLDIERS INTO SECURE
POSTS. IN AND AROUND SIROM BLOCK. [REDACTED] WAS ASSISTED IN
THIS DIRECTION. I OBSERVED THE DETAINEE BLEEDING FROM
ABOUT THE HEAD AND FACE AREA. THE DETAINEE WAS LOCATED
THE MIDDLE OF THE COOL BLOCK FLOOR TOWARDS THE SHOWER
AND REC YARD. NEAR CELL 15 OR 17. MEDICAL PERSONNEL
ARRIVED ALONG WITH OPERATION PERSONNEL. THE DETAINEE WAS
REMOVED FROM THE BLOCK AND TAKEN TO THE CLINIC BY MP C.
GURNEY. I DIRECTED ALL MP'S INVOLVED TO BEGIN A FORM DI
SWORN STATEMENT. // END OF STATEMENT //

10. SIGNATURE

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT BY"

TAKEN AT

DATED

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBERS MUST BE INDICATED.

DA FORM 2023, DEC 1988

DA FORM 2023, JUL 72, IS OBSOLETE

00112

STATEMENT OF _____

TAKEN AT _____

DATED _____

B. STATEMENT Continued

NOT
0400

AFFIDAVIT

_____, HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 1. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 11 day of Apr, 2003
at Camp Delta

ORGANIZATION OR ADDRESS _____

ORGANIZATION OR ADDRESS _____

INITIALS OF PERSON MAKING STATEMENT _____

Art 136 (b)(4) ucm
(Typed Name of Person Administering Oath)
(Authority To Administer Oath)

PAGE 2 OF 2 PAGE

PAGE 3, DA FORM 7023, DEC 1999

SWORN STATEMENT

For use of this form, see AR 190-45; the processing agency is OCSOPS

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION *AND DELTA #2 Sierra Block* 2. DATE (YYYYMMDD) *20030410* 3. TIME *2118* 4. FILE NUMBER
 5. LAST NAME FIRST NAME MIDDLE NAME 6. SSN 7. GRADE/STATUS
 8. ORGANIZATION OR ADDRESS
132nd AFD CD

I WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

ON 10 APRIL 2003, I [REDACTED] ASSIGNED TO Lima Block
 Responded to emergency on Sierra Block. When I arrived
 ON the block I ASSISTED in holding detainee [REDACTED] ON
 the floor while the restraints were being applied. After
 the restraints were applied I grabbed the detainee
 by his left shoulder and help escort the detainee from
 the rear of the block. When we arrived at Sierra Gate
 A LORNEY WAS waiting and we place the detainee on the
 gurney. I ASSISTED in escorting the detainee to Medical
 where I was relieved to return to the block [REDACTED]

||| End of Statement |||

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF 2

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NO. MUST BE INDICATED.

DA FORM 2823, DEC 1998

DA FORM 2823, JUL 72, IS OBSOLETE

00114

STATEMENT OF [REDACTED]

TAKEN AT 2116

DATED 10/11/03

8. STATEMENT (Continued)

Nothing Follows

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 1. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 10 day of April, 2003.

ORGANIZATION OR ADDRESS

ORGANIZATION OR ADDRESS

SIGNATURE OF PERSON MAKING STATEMENT

DA FORM 2823, DEC 1998

13200 MP Co. ARY131 (64) LCMJ
(Authority To Administer Oaths)

PAGE 2 OF 2 PAGES

USDA V.1.00

SWORN STATEMENT

For use of the Army, see AR 190-45; the processing agency is DCSOPS

PRIVACY ACT STATEMENT

AUTHORITY:
 PRINCIPAL PURPOSE:
 ROUTINE USES:
 DISCLOSURE:

For 10 USC Section 301; for 5 USC Section 301; E.O. 8387 dated November 22, 1963 2304
 To provide commanders and law enforcement officials with means by which information may be accurately obtained
 Your social security number is used as an administrative record means of identification to facilitate long and short-term
 Disclosure of your social security number is voluntary.

1. LOCATION

Camp Delta Prison Building

5. LAST NAME FIRST NAME MIDDLE NAME

3. DATES OF ADDRESS

1992 AD 6

2. DATE (YYYYMMDD)

2003 04 18

3. TIME

2035

4. FILE NUMBER

7. FIDELITY STATUS

I WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On 10 April 03 I was running the radio on "O" block I heard on the radio "We have a detainee out on Sierra block." I then went running to the canopy where [redacted] opened Omer block to let me out so I could go to Sierra block. I ran up onto the block where [redacted] and other MPs had the Detainee already on the ground without handcuffs or legions on. I secured the right leg while [redacted] applied the leg restraints on. We then secured the Left and Right hands behind his back [redacted] then asked me and whoever was on the Right leg to bring the legs up to secure them to the handcuffs. The detainee began to kick, but then cooperated after being told to do so by the SGTs. [redacted] Once secured [redacted] began screaming and yelling @ the detainee "you hit me, you hit me" [redacted] then jumped onto the detainee and began hitting him. The MPs on the block pulled [redacted] off and out of the area. We then picked the detainee up and carried him outside then the back of the block. A stretcher was waiting there with [redacted] to attend to the bleeding detainee. We then rolled him out onto the canopy where [redacted] took my place and escorted him to medical. [redacted] Nothing else follows.

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF

2

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF"

TAKEN AT

DATED

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED.

DA FORM 2823, DEC 1998

DA FORM 2823, JUL 72, IS OBSOLETE

00116

STATEMENT OF

TAKEN AT Camp Delta DATED 2003 04 10

9 STATEMENT *Continued*

7/10
Do not
use

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT FORCE, FRAUD, OR UNLAWFUL INFLUENCE.

(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 1st day of April 2003
Camp Delta, Guantanamo Bay, Cuba

(Signature of Person Administering Oath)

ORGANIZATION OR ADDRESS

(Typed Name of Person Administering Oath)

Att (36) (b) (4) UCMJ
(Authority To Administer Oath)

ORGANIZATION OR ADDRESS

INITIALS OF PERSON MAKING STATEMENT

PAGE 7 OF 2 PAGES

PAGE 3, DA FORM 2022, DEC 1990

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPs

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION Camp delta "S" block 2. DATE (YYYYMMDD) 2003 04 10 3. TIME 2117 4. FILE NUMBER
 5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED] 6. SSN [REDACTED] 7. GRADE/STATUS [REDACTED]
 8. ORGANIZATION OR ADDRESS 132nd MP Co.

I WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

While working as a M.P. on "M" Block I heard "S" block came over the radio that a detainee was loose on the block and I went to "S" Block when I got there Detainee [REDACTED] was on the floor and being put in restraints I went to the front of the cell block to get glasses because the detainees and other M.P.'s were blinking. I saw that [REDACTED] was involved from the beginning and I told him I would replace him in holding down the upper torso. we were directed to carry the detainee out the back of the cell block and around to the front. When we made it to the front a gurney was waiting along with medical staff and the detainee left the block.

/// END OF STATEMENT //

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF 1 PAGES

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED.

DA FORM 2823, DEC 1998

DA FORM 2823, JUL 72, IS OBSOLETE

GSAF

STATEMENT OF [REDACTED]

TAKEN AT 2117 Ws. DATED 10 APR 05

B. STATEMENT (Continued)

Not Used

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 1. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

[REDACTED]
(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 10 day of April, 2005, at [REDACTED]

ORGANIZATION OR ADDRESS [REDACTED]

ORGANIZATION OR ADDRESS [REDACTED]

TIALS OF PERSON MAKING STATEMENT [REDACTED]

(Typed Name of Person Administering Oath)
A.R.F. 13c (674) 42.45
(Authority To Administer Oaths)

1E 3. DA FORM 2823, DEC 1999

PAGE 1 OF 1 PAGES
USAPA V100

STATEMENT OF [REDACTED]

TAKEN AT

2/28/05

DATED

10/28/05

B. STATEMENT (Continued)

NOT USED

AFFIDAVIT

[REDACTED], HAVE READ OR HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE [REDACTED]. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE DETAILLED ALL CONNECTIONS AND HAVE INITIALED THE BOTTOMS OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

(Signature of Person Making Statement)

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 28th day of April, 2005.

at CAMP DELTA 2 Glamis City, Calif.

(Signature of Person Administering Oath)

(Typed Name of Person Administering Oath)

ISG 13240 MP Co M11

(Authority To Administer Oath)

WITNESSES:

ORGANIZATION OR ADDRESS

ORGANIZATION OR ADDRESS

INITIALS OF PERSON MAKING STATEMENT

PAGE 2 OF 2 PM

PAGE 2 OF FORM 2022, DEC 1999

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is DDCSOPS

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2851; E.O. 9397 dated November 22, 1983 (SSA).

PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately

ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval

DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION
Camp Delta - 5th Block

2. DATE YYYYMMDD
2003 04 10

3. TIME
1900

4. FILE NUMBER

5. LAST NAME, FIRST NAME, MIDDLE NAME

6. ORGANIZATION OR ADDRESS
932nd MP Co

I WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

I that approximately 1835 hrs on the twelfth day of April, year 2003, that I was working on T-block when I heard the next block over yelling and screaming. Then I heard on the radio yelling, "we need some fucking help, get the fuck over to 5th block." At that time I ran over to 5th block to see if I could help. I counted at least 15-25 MPs on the block already. I ran down the block where all the focus was, I saw a detainee on the ground with a MP's on top of him trying to secure him. I wanted to know what I could do to help so I took initiative and closed off both end doors. I didn't lock them cause I didn't have a key. After closing the front door off, I saw a MP grab another MP and escort him off the block for some reason I don't know. Then I went back down the block and met [redacted] he had blood covering his mouth. I stopped him and asked him if he was alright. He said he was fine but I noticed he was missing a front tooth. After he walked off I went back to see if I could do any thing else. [redacted] instructed me to take down all cell block numbers that were yelling during the incident, they are as follows: [redacted]. They were chanting "Allah-wake-hittu." After I did that I stationed myself at the rear door. After the detainee was escorted off the block, and made sure no one came in or out of the rear door so as not to walk in blood. There was a puddle of blood on the floor in the middle of the hall. I assume some of it was from [redacted]. After all had been clear and there was no more news for my presence, I asked [redacted] to get one of his soldiers to relieve me so I could return to my block at that time [redacted] took my place.

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF

PN

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED.

DA FORM 2823, DEC 1998

DA FORM 2823, JUL 72, IS OBSOLETE

STATEMENT OF [REDACTED]

TAKEN AT

1904 hrs.

DATED

269 04 10

2. STATEMENT (Continued)

at the rear entrance. That concludes my statement at this time
VEND STATEMENT

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE [REDACTED]. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE TO ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

Signature of Person Making Statement

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 10 day of APRIL 2007 at CAMP DELTA FTMO FUSA

ORGANIZATION OR ADDRESS

Signature of Person Administering Oath

ORGANIZATION OR ADDRESS

ART 36 (b)(4) UCMJ
Authority To Administer Oaths

SIGNATURE OF PERSON MAKING STATEMENT

DA FORM 2823, DEC 1998

PAGE 1 OF 2 PAGES

USDAV 01-00

SWORN STATEMENT

For use of this form, see AR 120-45; the proponent agency is DDCSOPS

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 3951; E.O. 9397 dated November 22, 1943 (SSM).

PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.

FOUNTAIN USES: Your social security number is used as an additional means of identification to facilitate filing and retrieval.

DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION
S-Block Camp Amis RA

2. DATE (YYYYMMDD)
03 04 27

3. TIME
1930 HRC

4. FBI NUMBER

5. LAST NAME, FIRST NAME, MIDDLE NAME
[REDACTED]

6. GRADE/STATUS
E-6

7. ORGANIZATION OR ADDRESS
7322 MP Co.

I WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On 10 April 03 I was working on G-Block as the Block Sgt. I heard a loud and screaming voice come across the radio saying, "I have one out on G-Block. This is not a mass casualty." I then ran to my gate and was let out by the sentry. I ran to G-Block where I was apprehended by [REDACTED] who had a busted up mouth. I then ran to the block where I saw [REDACTED] struggling with a detainee in the center of the block. I assisted them in a take down of the detainee. I then put a 3 piece bandage on him. Before he was taken expeditiously to medical where he was treated for a laceration to the head. The detainee was not shocked at the time.

| End of Statement |

Q. Was there any collusion from the MPs that you overheard?

A. No, there was not.

Q. Was there any MP striking or kicking after he was already on?

A: Yes, sir, [REDACTED]

Q: What was the other MP's response?

A: They immediately tried to pull him off; I stayed on to remain secured.

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF 2

A. ADDITIONAL PAGES MUST CONTAIN THE HEADLINE "STATEMENT OF"

TAKEN AT

DATED

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED

DA FORM 2023, JUL 72, IS OBSOLETE

00124

STATEMENT OF

TAKEN AT

Camp Delta I

DATED

10 APR 03

B. STATEMENT *Continued*

~~Nothing Follows~~

AFFIDAVIT

I HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 1. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THE STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

Signature of Person Making Statement

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 10 day of April, 2003, at S-Rock, near D.I.C.

ORGANIZATION OR ADDRESS

Signature of Public Administrator

(Typed Name of Public Administrator)

ORGANIZATION OR ADDRESS

Notarary To Do

INITIALS OF PERSON MAKING STATEMENT

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is DDCSOPS

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC Section 3801; Title 5 USC Section 2951; E.O. 12067 dated November 22, 1983 (ESM).

PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.

ROUTINE USE: Your social security number is used as an additional means of identification to facilitate filing and retrieval.

DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION: Camp D S block

2. DATE (YYYYMMDD): 20030410

3. TIME: 1900

4. FILE NUMBER: [REDACTED]

5. LAST NAME, FIRST NAME, MIDDLE NAME: [REDACTED]

6. GRADE/STATUS: E-3

7. ORGANIZATION OR ADDRESS: JROG - LINGUIST

I WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On April 10 2003 I observed a detainee outside of his cell on S-block. At the time I got on the block, & several guards were trying to hold down the detainee who was putting up heavy resistance. The detainee was covered in blood, as were some of the guards. After the situation was under control, the detainee was taken to the clinic.

Nothing follows.

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF

ADDITIONAL PAGES MUST CONTAIN THE PHRASE "STATEMENT OF"

TAKEN AT

DATE

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED.

DA FORM 7872, DEC 1988

DA FORM 2822, JUL 72, IS OBSOLETE

STATEMENT OF

TREAT

DATED

9 STATEMENT (Continued)

AFIDAVIT

_____, HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE _____. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT FORCE, FEAR, OR OTHER INFLUENCE, OR UNLAWFUL INDUCEMENT.

WITNESSES:

ORGANIZATION ON ADDRESS

ORGANIZATION OR ADDRESS

INITIALS OF PERSON MAKING STATEMENT

Exhibit and sworn to before me, a person authorized by law to administer oaths, this 10 day of April, 2003
at Charlaramm Bay, Cebu

Int. 136(b)(4) UCMT.
(Authority To Administer Product)

SWORN STATEMENT

For use of this form, see AF 150-45; the proponent agency is ODCBOPS

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSM).

PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately

ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.

DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION

Sierra Black

2. DATE (YYYYMMDD)

20070416

3. TIME

1758

4. FILE NUMBER

5. LAST NAME, FIRST NAME, MIDDLE NAME

6. SSN

7. GRADE/STATUS

8. ORGANIZATION OR ADDRESS

132 MD MP PO

I WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

I was watching [redacted] exercising in rec yard.
 At 1615 hrs [redacted] started doing Martial Arts (Kicks)
 I [redacted] instructed [redacted] to stop doing
 Martial Arts. Detainee complied, then a couple minutes later
 started Martial Arts (Kicks, blocks and punches) again.
 I [redacted] told [redacted] to stop a second time
 S-15 [redacted] Complied again then started again.
 Recreation time was finished so we removed him from
 Rec yard, to place him in Shower.
 So movement was to cell. Shower was refused.
 Nothing follows [redacted]

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF 2 PAG

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED.

DA FORM 2823, DEC 1998

DA FORM 2823, JUL 72, IS OBSOLETE

USA

STATEMENT OF [REDACTED]

TAKEN AT

CAMP RITA

DATED

10 APR 03

STATEMENT (Continued)

NOT USED

NOT USED

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

WITNESSES:

ORGANIZATION OR ADDRESS

ORGANIZATION OR ADDRESS

NAME OF PERSON MAKING STATEMENT

F. J. DA FORM 3823, DEC 1998

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 10 day of April, 2003, at Camp Delta, Guantanamo Bay, Cuba.

Signature of Person Administering Oath

NOT. MR. RICH LACONIS
[Signature]
(Authority To Administer Oaths)

PAGE 2 OF 2 PAGES

USDA 6120